

Fill in this information to identify the case:

Debtor 1 Jonathan Montrel Jones

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of Mississippi

Case number 25-50589-KMS

Official Form 410S2

Notice of Postpetition Mortgage Fees, Expenses, and Charges 12/15

If the debtor's plan provides for payment of postpetition contractual installments on your claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any fees, expenses, and charges incurred after the bankruptcy filing that you assert are recoverable against the debtor or against the debtor's principal residence.

File this form as a supplement to your proof of claim. See Bankruptcy Rule 3002.1.

Southwest Stage Funding, LLC

Name of creditor: dba Cascade Financial Services

Court claim no. (if known): 3

Last 4 digits of any number you use to identify the debtor's account: 5 6 0 6

Does this notice supplement a prior notice of postpetition fees, expenses, and charges?

☒ No

☐ Yes. Date of the last notice: _____

Part 1: Itemize Postpetition Fees, Expenses, and Charges

Itemize the fees, expenses, and charges incurred on the debtor's mortgage account after the petition was filed. Do not include any escrow account disbursements or any amounts previously itemized in a notice filed in this case or ruled on by the bankruptcy court.

Description	Dates incurred	Amount
1. Late charges	_____	(1) \$ _____
2. Non-sufficient funds (NSF) fees	_____	(2) \$ _____
3. Attorney fees	<u>5/21/2025</u>	(3) \$ <u>350.00</u>
4. Filing fees and court costs	_____	(4) \$ _____
5. Bankruptcy/Proof of claim fees	_____	(5) \$ _____
6. Appraisal/Broker's price opinion fees	_____	(6) \$ _____
7. Property inspection fees	_____	(7) \$ _____
8. Tax advances (non-escrow)	_____	(8) \$ _____
9. Insurance advances (non-escrow)	_____	(9) \$ _____
10. Property preservation expenses. Specify: _____	_____	(10) \$ _____
11. Other. Specify: _____	_____	(11) \$ _____
12. Other. Specify: _____	_____	(12) \$ _____
13. Other. Specify: _____	_____	(13) \$ _____
14. Other. Specify: _____	_____	(14) \$ _____

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid. See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1.

Debtor 1 Jonathan Montrel Jones
First Name Middle Name Last Name

Case number (if known) 25-50589-KMS

Part 2: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.

Check the appropriate box.

☐ I am the creditor.

☒ I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

X /s/ Jeff D. Rawlings
Signature

Date 6/3/2025

Print: Jeff D. Rawlings
First Name Middle Name Last Name

Title Attorney at Law

Company Rawlings & MacInnis, P.A.

Address PO Box 1789
Number Street
Madison MS 39130
City State ZIP Code

Contact phone 601-898-1180

Email jeff@rawlingsmacinnis.net

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI**

IN RE: JONATHAN MONTREL JONES

NO. 25-50589-KMS

CERTIFICATE OF SERVICE

I, Jeff Rawlings, do hereby certify that I served a true and correct copy of the **Notice of Post Petition Mortgage Fees, Expenses, and Charges** by U.S. Mail, postage prepaid to Jonathan Montrel Jones, 3461 Hwy 528, Heidelberg, MS 39439 and via the ECF notification service to Thomas Carl Rollins, Jr., David Rawlings and the U. S. Trustee.

DATED: June 3, 2025.

/s/ Jeff Rawlings
Jeff D. Rawlings

Jeff D. Rawlings
Rawlings & MacInnis, P.A.
P.O. Box 1789
Madison, MS 39130-1789
601-898-1180
jeff@rawlingsmacinnis.net
MSB # 4642

Rawlings & MacInnis, P.A.

Post Office Box 1789
 Madison, Mississippi 39130-1789
 601-898-1180
 Federal ID No. 64-0815065

May 21, 2025

CASCADE FINANCIAL
 BANKRUPTCY@CASCADELOANS.COM

CASE NO. 25-50589

I N V O I C E

Matter ID: 37778
 JONES, JONATHAN MONTREL
 Client ID: CASC

Invoice #: 107922

For Professional Services Rendered:

05/21/2025	JDR	Preparation of Jones proof of claim	\$750.00
Total Professional Services:			\$750.00

INVOICE SUMMARY

For Professional Services:	0.00 Hours	\$750.00
Total Due:		\$750.00

350.00 Recoverable Fees and Costs

400.00 Non-Recoverable Fees and Costs